

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

In re application of: **Benjamin Oshlack, et al.**
Application No.: **10/689,866**
Filed: **October 21, 2003**
For: **TAMPER-RESISTANT ORAL OPIOID AGONIST FORMULATIONS**

Sir:

Transmitted herewith is an **AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY (1 page)** in the above-identified application.

- [] Small entity status under 37 C.F.R. 1.9 and 1.27 has been previously established.
- [] Applicants assert small entity status under 37 C.F.R. 1.9 and 1.27.
- [] No fee for additional claims is required.
- [] A filing fee for additional claims calculated as shown below, is required:

(Col. 1)		(Col. 2)		SMALL ENTITY		LARGE ENTITY		
FOR:	REMAINING	HIGHEST		RATE	FEES	OR	RATE	FEES
	AFTER	PREVIOUSLY	PRESENT					
	AMENDMENT	PAID FOR	EXTRA					
TOTAL CLAIMS	16	Minus 20	=	0			x \$ 18	\$ 0
INDEP. CLAIMS	2	Minus 3	=	0			x \$ 88	\$ 0
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+ \$150	\$		+ \$300	\$ 0
				TOTAL:	\$	OR	TOTAL:	\$ 0.00

* If the entry in Co. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

[] Also transmitted herewith are:

[] Petition for month extension under 37 C.F.R. 1.136

[] Other:

[] Check(s) in the amount of \$ 0.00 is/are attached to cover:

[] Filing fee for additional claims under 37 C.F.R. 1.16

[] Petition fee for month extension under 37 C.F.R. 1.136

[] Other:

[X] The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0552.

[] Any filing fee under 37 C.F.R. 1.16 for the presentation of additional claims which are not paid by check submitted herewith.

[X] Any patent application processing fees under 37 C.F.R. 1.17.

[X] Any petition fees for extension under 37 C.F.R. 1.136 which are not paid by check submitted herewith, and it is hereby requested that this be a petition for an automatic extension of time under 37 CFR 1.136.

Oleg Ioselevich, Reg. No. 56,963
DAVIDSON, DAVIDSON & KAPPEL, L.P.
485 Seventh Avenue, 14th Floor
New York, New York 10018
Tel: (212) 736-1940
Fax: (212) 736-2427

AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY

In re Application of:

Oshlack et al.

Application No.

10/689,866

Filed:

October 21, 2003

Title:

TAMPER-RESISTANT ORAL OPIOID AGONIST FORMULATIONS

Attorney Docket No.

200.1133CON

Art Unit:

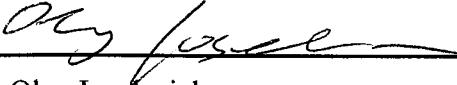
1618

The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. (Note: pursuant to 37 CFR 10.57(c), a practitioner cannot authorize other registered practitioners to conduct interviews without consent of the client after full disclosure.) Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:

Name	Registration Number
Phillip C. Strassburger	34,258

This is not a Power of Attorney to the above-named practitioner. Accordingly, the practitioner named above does **not** have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the above-named practitioner should be executed and filed in the United States Patent and Trademark Office.

SIGNATURE of Practitioner of Record

Signature		Date
Name	Oleg Ioselevich	Registration No., if applicable 56,963
Telephone	(212) 736-1940	

This collection of information is required by 1.31, 1.32 and 1.34. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.